cost of the vaccine and the fact that this vaccine is not indigenously produced. However, vaccination of doctors and other staff facing the risk of infections are advised for immunisation against Hepatitis 'B'.

Facilities by private hospitals to vulnerable sections of society

972. SHRI SHANTI TYAGI:

SHRI YASHWANT SINHA:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that the ten prestigious private hospitals in the capital were allotted vast areas of land on nominal prices and also allowed to import without any duty (high tech) medical equipment from foreign countries on the condition that 25 per cent will be reserved for weaker sections and other 25 per cent subsidised for the economically poor and also free services in O.P.D. for patients of indigent category; and

(b) if so, whether these private hospitals are observing the condition, which they had agreed to enforce?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI D. K. THARA DEVI SIDDHARTHA): (a) As per the information received from Delhi Administration, certain private Institutions in the capital have been allotted land at concessional rates. These institutions are, therefor, expected to render free OPD and IPD (Indoor-patients) services to patients belonging to economically weaker sections of the society. As regards custom duty exemption, the notification No. 64/88-Cus. dated 1.3.1988 issued by Ministry of Finance stipulates that the hospitals and institutions availing custom duty exemption for the import of equipment are to provide 40 per cent of the services in OPD free of cost and 10 per cent of beds are to be reserved for free treatment of poor patients.

(b) Delhi Administration have informed that the concerned private institutions have been doing free OPD work. Now they have been asked to provide free services to indoor patients also. A system of reference from Govt. hospitals has been instituted by Delhi Administration in order to ensure that the private hospitals/institutions availing customs duty exemption do the requisite free work as prescribed in the notification of the Ministry of Finance.

Holding of Shikayat Adalats

973. MAULANA OBAIDULLAH KHAN AZMI: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that Shikayat Adalats are being held by the Ministry of Health and Family Welfare;

(b) if so, what is the purpose and scope of such Adalats;

(c) what is the composition of the Adalat;

(d) what is the date of commencement of these Adalats and what is their frequency;

(e) what are the details of achievements of these Adalats;

(f) when the next adalat is scheduled to be held, indicating the date of last such Adalat;

(g) whether any publicity is given to holding of such Adalats; and

(h) if so, what are the details thereof?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI D. K. THARA DEVI SIDDHARTHA): (a) to (h) A 'Shikayat Adalat' was constituted in this Ministry on 11.9.89. The constitution and scope of the Shikayat Adalat may be seen at Statement. (*See* below). A meeting of the Adalat was held on 8.6.90, wherein members sought certain clarifications/information. The Deptt. of Public Grievances have been asked to clarify the points raised by the members.

Statement

No. K. 11016/7/88-V&EMR

GOVERNMENT OF INDIA

MINISTRY OF HEALTH AND FAMILY WELFARE

NEW DELHI, Dated

SUBJECT : Ministry of Health & F.W.— constitution of 'Shikayat Adalat' relating to CGHS and Hospitals.

In order to settle the grievances of the aggrieved CGHS beneficiaries and public at large receiving treatment from the hospitals, within a reasonable time, it has been decided to form 'Shikayat Adalat' with immediate effect in Delhi under the Ministry of Health and F.W. The modalities of the formation of the Adalat are as indicated below:

(a) Bench

The Adalat will comprise of a four member bench chaired by the Dy. Director General (M) of Dte. G.H.S. New Delhi. The other three member will be as below:

(i) Dy. Secretary (IF), Ministry of Health & F.W.

(ii) Director, CGHS.

(iii) Medical Supdt. of the related Hospital will be associated at the time of Adalat.

(iv) Director (EMR), Det. G.H.S. Member-Secretary.

(b) Scope

The type of complaints and disputes which will be taken up by the Adalat will cover all types of problems relating to the services being rendered by the CGHS and the hospitals.

(c) Jurisdiction and Venue

The Adalat for the present will only deal the cases relating to the CGHS/ Hospitals in Delhi only. The venue of the Adalat has been kept open and will be intimated to all concerned at the appropriat time.

(d) Frequency date and time

The Adalat will be held once in three months. The venue and date will be fixed by the Chairman and a notice will be sent to all representationist/complainants with intimation that he may present his case orally if he so wishes.

(e) Complaints/representations

All complaints for the Adalat shall be sent to Dr. B. K. Verma, Director (EMR), Dte. GHS, New Delhi under intimation to Director of Public Grievances Ministry of Health and Family Welfare, Nirman Bhavan, New Delhi-110011. Dr. B. K. Verma, as Member Secretary will examine and place the complaints before the Adalat wherever necessary. Complaints received after the period of six weeks from the date of hearing will be placed in the next hearing of the Adalat. The cases which do not fall within the scope of the Adalat, will be replied to the complanant indicating the result of enquiry/investigation etc. and the decision taken.

Sd/-

(R. Sethuraman)

DEPUTY SECRETARY TO THE GOVT. OF INDIA

Development of oral contraceptive

974. DR. G. VIJAYA MOHAN REDDY: Will the Mnister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that 'Centechroman' a non-harmonal oral contraceptive developed by the Doctors of Central Drugs Research Institute, is considered to be very effective without much side effects;

(b) if so, what action Government propose to take, to manufacture the drug in sufficient quantities to reach all family planning centres in the country; and

(c) what steps Government propose to take give adequate publicity for ensuring wide-spread use of the drugs?